PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

| FOR NUMBER FILED NUMBER EXTRA TOTAL CHARGEABLE CLAIMS 21 minus 20= * 1 INDEPENDENT CLAIMS 21 minus 3 = * 1 MULTIPLE DEPENDENT CLAIM PRESENT 243= OR X86= * If the difference in column 1 is less than zero, enter "0" in column 2 | FE 770.00 18 36 |
|--|-----------------------|
| TOTAL CLAIMS FOR NUMBER FILED NUMBER EXTRA Number Extr | FEE 770.00 |
| FOR NUMBER FILED NUMBER EXTRA TOTAL CHARGEABLE CLAIMS 2 I minus 20= * 1 INDEPENDENT CLAIMS 1 minus 3 = * 1 MULTIPLE DEPENDENT CLAIM PRESENT 1 | FEE 770.00 |
| TOTAL CHARGEABLE CLAIMS INDEPENDENT CLAIMS INDEPENDENT CLAIM PRESENT * If the difference in column 1 is less than zero, enter "0" in column 2 NUMBER EXTRA BASIC FEE 385.00 OR BASIC FEE 385.00 OR SASIC FEE 385.00 OR X\$18 X\$ 9= | FE 770.00 18 36 |
| TOTAL CHARGEABLE CLAIMS 2 I minus 20= * 1 INDEPENDENT CLAIMS 4 minus 3 = * MULTIPLE DEPENDENT CLAIM PRESENT * If the difference in column 1 is less than zero, enter "0" in column 2 * If the difference in column 1 is less than zero, enter "0" in column 2 | 18 |
| INDEPENDENT CLAIMS MULTIPLE DEPENDENT CLAIM PRESENT X\$ 9= | 36. |
| MULTIPLE DEPENDENT CLAIM PRESENT * If the difference in column 1 is less than zero, enter "0" in column 2 * If the difference in column 1 is less than zero, enter "0" in column 2 | 36. |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | 36 |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | 7 |
| | C101 |
| CLAIMS AS AMENDED - PART II | 874 |
| (Column 1) (Column 2) (Oct.) OTHE | R THAN |
| HIGHEST OH SMALL | ENTITY |
| HEMAINING AFTER AMENDMENT NUMBER PREVIOUSLY PAID FOR PREVIOUSLY PAID FOR TOTAL | ADDI- TIONAL |
| Total * Minus ** | FEE |
| Independent * Minus *** = X\$9= OR X\$18= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | |
| 1145 | |
| TOTAL OH #290= | |
| (Column 1) (Column 8) (O | |
| | |
| AMENDUCATE PREVIOUSLY EXTEN PATE TIONAL | ADDI- TIONAL |
| Total * Minus ** PAID FOR FEE | FEE |
| Independent * Minus *** = X\$ 9= OR X\$18= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | |
| 1145 | |
| OH +230= | |
| (Column 1) ADDIT. FEE ADDIT. FEE | |
| | |
| AFTER PREVIOUSLY FYTRA DATE TIONAL | ADDI- |
| Total * Minus * Minus * AMENDMENT PAID FOR EXTRA RATE TIONAL RATE | TIONAL FEE |
| Independent * Minus ** = X\$9= OR X\$18= | |
| FIRST PRESENTATION OF MULTIPLE DEDENIES TO THE YEAR OF | |
| | |
| If the entry in column 1 is less than the entry in column 2, write "0" in column 3. | |
| TOTAL T | |
| The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | |